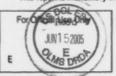
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U. CZSO	2. Fiscal Year Covered From:
	01/01/2005 Through: 12/31/2004
Name and address of person filing.	4. Name, file number, and address of labor organization.
John A YORIO	Name NATA Conference of Firemenelika
/	Labor Organization File Number
O. Box, Bldg., Room No., if any 239-446 Ave, 1404	P.O. Box, Building and Room Number, If any 239-415 AVE
Street	Street Suite 1404
City P. H.Sburgh	City Fgb
State PA ZIP Code + 4 15222	State 19 ZIP Code +4 15222
Position in labor organization. PRESIDENTE	Business AgenT
	spouse or minor child directly or indirectly had any of the following interests exclusions set forth in the instructions):
(except as specified in the e Held an interest in, engaged in transactions (including loans) with,	or derived income or other economic benefit of
(except as specified in the e Held an interest in, engaged in transactions (including loans) with, onetary value from an employer whose employees your organic	or derived income or other economic benefit of station represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
Held an interest in, engaged in transactions (including loans) with, onetary value from an employer whose employees your organic Name and address of Employer (including trade name, if any).	or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
(except as specified in the enterest in, engaged in transactions (including loans) with conetary value from an employer whose employees your organic Name and address of Employer (including trade name, if any). Order Name ART Conference Of Firemen 6	or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
(except as specified in the earth of the content of	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. Area following 75.00 Mater 8.35
(except as specified in the entering the interest in, engaged in transactions (including loans) with constary value from an employer whose employees your organic Name and address of Employer (including trade name, if any). Order of Firemen & Fir	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. Area following 75.00 Mater 8.44 Local 8.35
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(except as specified in the extension of the control of the contro	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.a. Nature of Interest, Transaction, or Income. 7.a. Nature of Interest, Transaction, or Income. 8.35 8.41 8.35 9.41 7.b. Amount. Signature by of Perjury and other applicable penalties of the law, that all of the information penying documents), has been examined by the signatory and is, to the best of the
(except as specified in the ear. Held an interest in, engaged in transactions (including loans) with nonetary value from an employer whose employees your organic Name and address of Employer (including trade name, if any). Name ART Conference of Firemen & Trade Name, if any: Locate 155 P.O. Box, Bldg., Room No., if any Street 239-4th Ave, Ste 1404 City Egh. 2IP Code +4 15232 15. Signature and verification. The undersigned declares, under penalt submitted in this report (including the information contained in any accommodation)	or derived income or other economic benefit of cation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.a. Nature of Interest, Transaction, or Income. 7.a. Nature of Interest, Transaction, or Income. 8.3.5 17.05 14.17.05 14.17.05 14.17.05 15.17.05 16.17.05 17.1. Amount.

Name of Person Filing	File Number U-2580
B. Held an interest in or derived income or economic benefit with monetar substantial part of which consists of buying from, selling or leasing to, or of of an employer whose employees your labor organization represents or is (2) any part of which consists of buying from or selling or leasing directly of dealing with your labor organization or with a trust in which your labor org	otherwise dealing with the business s actively seeking to represent, or or indirectly to, or otherwise
8. Name and address of Business (Including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
P.O. Box, Bidg., Room No., if any Street	
OL.	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	
	12.b. Amount.
C. Received from any employer (other than an employer covered or from any labor relations consultant to an employer any payment of m	under parts A and B above) noney or other thing of value. 14.a. Nature of payment.
Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. rawie or payment.
P.O. Box, Bldg., Room No., if any Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.